ATTACHMENT #4 BID/BIDDER CERTIFICATION SHEET

Only an individual who is authorized to bind the bidding firm contractually shall sign the <u>Bid/Bidder Certification Sheet</u>. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with <u>original signatures</u>. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

- A. Our all-inclusive bid is submitted in a sealed envelope marked "Bid Submittal Do Not Open".
- B. All required attachments are included with this certification sheet.
- C. I have read and understand the DVBE participation requirements and have included documentation demonstrating that I have met the participation goals.
- D. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
- E. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection

The contract of the contract o	T-v-		Towns and the second se			
1. Company Name	2. Telephone Number		2a. Fax Number			
Anchor-41 Construction, LLC	(559) 740-	-7776	(559) 772-8745			
2b. Email Address djruiz@anchor41.com						
3. Address						
310 W. Murray Ave., Visalia, CA 93291		III.				
Indicate your organization type:						
4. Sole Proprietorship 5.	Partners	ership 6. 🗹 Corporation				
Indicate the applicable employee and/or corporation numb	er:					
7. Federal Employee ID No. (FEIN)		8. California Corpo	oration No. 201711610084			
Indicate the Department of Industrial Relations informatio	n:					
9. Contractor Registration Number 1000056546	944-007					
Indicate applicable license and/or certification information	Ľ					
10. Contractor's State Licensing Board Number		11. PUC License N	lumber			
"B" 1037138		CAL-T-				
12. Bidder' Name (Print)		13. Title				
David J. Ruiz		Managing Member				
14. Signature		15. Date				
Jan 12		April 7, 2019				
16. Are you certified with the Department of General Services, Office of Small Business and Disabled Veteran Bus						
Enterprise Services (OSDS) as:		or ornan Submitto an	a Biodolog / otoldii Businoss			
a. Small Business Enterprise Yes ☑ No ☐	b. Disabled Veteran Business Enterprise Yes ✓ No □					
If yes, enter certification number:	If yes, enter your service code below:					
2007177	2007177					
NOTE: A copy of your Certification is required to be incl	uded if either	of the above items is	checked "Yes".			
Date application was submitted to OSDS, if an application						
17 Are you a Non-Small Ruciness committing to the use	of 25% Court	Fod Small Duair acc S	uhaantaataa Daniaiti o			
17. Are you a Non-Small Business committing to the use of 25% Certified Small Business Subcontractor Participation? Yes No						
If Yes, complete and return the Bidder Declaration form, C	GSPD-05-105	with your bid.				
		100000000000000000000000000000000000000				

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STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION

BID PROPOSAL ADM-1412 (REV 11/2015)

ATTACHMENT 1

ITEM NO.	ITEM		TOTAL (Lump Sum)	
. 1	Labor, parts, materials, supplies, tools, fixtures, equipment, travel, and incidentals necessary for the removal and installation of bathroom fixtures, painting, and electrical work for a bathroom remodel and installation of wash basin and lockers in accordance with Standard Agreement, STD 213, Exhibit A, Scope of Work.		\$ 48,992.20	
MODIFICATIONS, EACH LINE ITEM	ALTER, MODIFY OR CHANGE THIS BID PROPOSAL SHEET. ANY ALTERATIONS. OR CHANGES TO THIS BID PROPOSAL SHEET WILL BE GROUNDS TO REJECT THE BID. MUST BE BID. PLEASE DO NOT LEAVE ANY UNIT PRICE COLUMN BLANK OR THIS BID TWILL BE DISQUALIFIED FROM COMPETITION FOR CONTRACT A WARD.	TOTAL THIS PROPOSAL	s 48,992.20	

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	ATTACHMENT 2											
	California—Department of General Services. 05-105 (EST 8/05)	Procurement Division			Socialion Nur	uber_32A	0446					
		BID	DER DECLARA	ATION								
1.	Prime bidder information (Review attached Bidder Declaration Instructions prior to completion of this form): a. Identify current California certification(s) (MB, SB, SB/NVSA, DVSE): MB/DVBE or NoneIf 'None', go to Item#2) b. Will subcontractors be used for this contract? YesNo(If yes indicate the distinct element of work <u>your firm</u> will perform in this contract e.g. list the proposed products produced by your firm (including the supplying of services and goods) pursuant to Title 2 CCR §1896.71 (b), state if your firm owns the transportation vehicles that will deliver the products to the State, identify which solicited services your firm will perform, etc.) Use additional sheets, as necessary.											
2.	c. If you are a California certif	(2) If the contra provided in this	contract (quantity a	_No nt rental, does your company ow nd value)? YesNoN/A bcontractors for this contract (A	-							
	Subcontractor Name Contact Person Phone Number & Fax Number	Subcontractor Address & Email Address	CA Certification	Work performed or goods provided for this contract	Corresponding	Good	51%					
	Sturnbaugh & Assoc. Michael Eubling 818-240-1627	3303 N. San Fernando Blvd. Burbank, CA 91504	THE SECTION OF THE SE	Toilet Partitions & Accessories	% of bid price	Standing?	Rentat?					

CERTIFICATION: By signing the bid response, I certify under penalty of perjury that the information provided is true and correct.

ATTACHMENT #6

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES PROCUREMENT DIVISION

DISABLED VETERAN BUSINESS ENTERPRISE DECLARATIONS
STD 843 (Rev. 5/2006)
Instructions: The disabled veteran (DV) owner(s) and DV manager(s) of the Disabled Veteran Business Enterprise (DVBE) must complete this declaration when a DVBE contractor or subcontractor will provide materials, supplies, services or equipment [Military and Veterans

Code Section 999.2]. Violations are misdemeanors and punishable by imprisonment or fine and violators are liable for civil penalties. All signatures are made under penalty of perjury. SECTION 1 Anchor-41 Construction, LLC 2007177 Name of certified DVBE: DVBE Reference Number: Description (materials/supplies/services/equipment proposed): Prime/General Contractor 32A0446 Solicitation/Contract Number: SCPRS Reference Number: (FOR STATE USE ONLY) SECTION 2 APPLIES TO ALL DVBEs. Check only one box in Section 2 and provide original signatures. I (we) declare that the DVBE is not a broker or agent, as defined in Military and Veterans Code Section 999.2 (b), of materials, supplies, services or equipment listed above. Also, complete section 3 below if renting equipment, Pursuant to Military and Veterans Code Section 999.2 (f), I (we) declare that the DVBE is a broker or agent for the principal(s) listed below or on an attached sheet(s). (Pursuant to Military and Veterans Code 999.2 (e), State funds expended for equipment rented from equipment brokers pursuant to contracts awarded under this section shall not be credited toward the 3-percent DVBE participation goal.) All DV owners and managers of the DVBE (attach additional pages with sufficient signature blocks) or David J. Ruiz ited Name of DV Owner/Manager) ited Name of DV Owner/Manager) (Signature of DV Owner/Manager) (Date Signed) Firm/Principal for whom the DVBE is acting as a broker or agent: (If more than one firm, list on extra sheets.) (Print or Type Name) Firm/Principal Phone: Address: SECTION 3 APPLIES TO ALL DVBES THAT RENT EQUIPMENT AND DECLARE THE DVBE IS NOT A BROKER. Pursuant to Military and Veterans Code Section 999.2 (c), (d) and (g), I am (we are) the DV(s) with at least 51% ownership of the DVBE, or a DV manager(s) of the DVBE. The DVBE maintains certification requirements in accordance with Military and Veterans Code Section 999 et. Seq The undersigned owner(s) own(s) at least 51% of the quantity and value of each piece of equipment that will be rented for use in the contract identified above. I (we), the DV owners of the equipment, have submitted to the administering agency my (our) personal federal tax return(s) at time of certification and annually thereafter as defined in Military and Veterans Code 999.2, subsections (c) and (g). Failure by the disabled veteran equipment owner(s) to submit their personal federal tax return(s) to the administering agency as defined in Military and Veterans Code 999.2, subsections (c) and (g), will result in the DVBE being deemed an equipment Disabled Veteran Owner(s) of the DVBE (attach additional pages with signature bloc David J. Ruiz ited Name) 2318 Teakwood Way, Hanford, CA 93230 (559) 362-0898 82-1169494 fress of Owner) (Telephone) (Tax Identification Number of Owner) Disabled Veteran Manager(s) of the DVBE (attach additional pages with sufficient signature blo erson to sign): David J. Ruiz ited Name of DV Manager)